

**Emergency Deficiencies Correction Funding Application**

**Initial Submission Date:**

**Application ID:** 564

**Resubmittal Date:**

Please provide as much of the requested information as possible. SFB staff will assist in developing required information that is not currently available.

**District Name:** Alhambra Elementary District

**Superintendent:** Dr. J. Rice

**Contact Person:** John Frankenfield

**Contact Phone Number:** (602) 336-2921

**Contact Email:** johnfrankenfield@alhambraesd.org

**School Site:** Alhambra District Office

**Buildings:**

**Description of Problem**

Please include a detailed description of the issues, as well as a description of and a copy of any professional studies, citations or reports from government entities, recommended solutions, and any cost information or estimates. If additional space is needed, please attach.

**Project Category:** HVAC

**Are any of the above-described issues in buildings or part of buildings that are leased to another entity, including a district sponsored charter school?** N

**Available Funding** Was money to address this issue included in your adopted budget for this fiscal year? ?

Current unencumbered building renewal fund balance (Fund 690):

Current fiscal year building renewal expenditures:

Current balance of unrestricted capital:

Please outline any associated insurance coverage.

**Liaison:** Breuer

gbreuer@azsfb.gov

602-542-6139

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Superintendent Printed Name

\_\_\_\_\_  
Superintendent Signature

\_\_\_\_\_  
Date